

ENTRY BLANK

DO NOT DETACH

PLEASE TYPE OR PRINT

Entered previous May Show

yes no

Ms.

Mr. Artist Stephen Paternite (Last Name Last)

Permanent Address 611 Mull Avenue Akron
Street City

44313 44313 Tel. (216) 784-9811
Zip Area Code

Temporary or Studio Address Same as above
Street City

Tel. ()
Zip Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in? _____

Collaborator _____
(If Any)

If May Show entries are not accepted or not sold:

- Artist will pick up at Museum.
- Museum should dispose of.
- Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.



This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until May 30, 1982.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature 

DO NOT DETACH

